

The Indiana University School of Nursing Clinical Faculty Mentoring Initiative

Deborah L Cullen, Ed.D.
Professor, Department of Science of Nursing Care
Director, Associate Faculty Academy
Indiana University School of Nursing
dcullen@iu.edu 317-278-3926

Susan M. McLennon, PhD, RN
Associate Professor and Assistant Chair
Department of Science of Nursing Care
Indiana University School of Nursing
smclenno@iu.edu 317-278-0459

Carol Shieh, DNSc, RNC-OB
Associate Professor and Assistant Chair
Department of Community and Health Systems
Indiana University School of Nursing
wshieh@iu.edu 317-278-1575

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Abstract

Newly doctorally prepared clinical assistant professors as well as new clinical faculty hires have a great need for scholarship mentoring. Clinical assistant faculty who are doctorally prepared (16) represent 26% of full-time faculty (95) but 80% of the full-time clinical workforce (20). Only 5% of all faculty papers published from July 2012 through September 2014 (12 out of 233 publications) were authored by clinical assistant professors. A recent survey also indicated that clinical professors desire scholarship collaborators (82%), and they identified the lack of mentoring (82%) and an overextended work life (91%) as barriers for achieving promotion.

PURPOSE: The IUSON has not advanced a clinical associate promotion in over a decade. The purpose for this mentoring initiative is to enhance doctorally prepared clinical assistant professors' ability to achieve promotion from assistant to associate rank.

METHODOLOGY: This initiative is designed to achieve individual growth as well as system/organizational goals. A total of 16 protégés will be matched with a mentor for two years for scholarship enhancement and progress toward promotion. Mentoring activities will focus on improving individual scholarly productivity via connections with IUSON scholar teams and teams external to IUSON, as well as participation in the national NLN scholarship retreat. Additional protégé developmental activities include attendance at P&T workshops, engagement in P&T campus websites, submitted papers and abstracts, and attendance at IUSON Mentoring Initiative events. System change is planned via review of the clinical annual review policy (for feedback toward promotion), administrative promotion pay policy, and creation of a clinical promotion workshop for primary and school-level P&T committees, department chairs, and leadership.

ASSESSMENT: There are mentoring measures as well as program assessment benchmarks for each goal. We use the Best Practices in Academic Mentoring Model to guide assessment of mentoring. The model focuses on processes (development of teaching, research, and service skills) facilitating the growth of future leaders in nursing and nursing education. The model also suggests that a mentor-protégé dyad develops a reciprocal relationship during mentoring processes in order to achieve mutually agreed-upon goals. To evaluate quality of mentoring processes, we will use the Mentorship Quality Scale and the Mentoring Learning Scale. Benchmarks that assess program progress include protégé attendance at P&T workshops, participation in "Scholar Teams," engagement in P&T campus websites, submitted papers and abstracts, and attendance at IUSON Mentoring Initiative activities. IUSON system change will be assessed via attendance at the clinical promotion workshop for review committees and administrative leadership, as well as via the updated promotion pay and clinical annual review administrative policies.

SUSTAINABILITY: Goal 5 of this Initiative is to integrate the *Clinical Faculty Mentoring Initiative* into departments and the IUSON to guarantee sustainability. At the completion of this initiative, a feedback mechanism for clinical rank faculty annual reviews as related to progression toward promotion will have been implemented at the department level. A school-wide system to connect clinical rank faculty with IUSON Scholar Teams, the IUSON Center for Nursing Research and Scholarship, and other existing resources will be strengthened. Additionally, a stronger culture that values mentoring for clinical rank faculty will be integrated into the IUSON organizational mission.

The Indiana University School of Nursing (IUSON) core (Bloomington, Columbus, Indianapolis) has not promoted a clinical faculty member in over a decade. Barriers are potent, real, and overwhelming to our full-time clinical assistant professors. Mentoring is a useful transformational approach for advancing organizational culture. Currently within the IUSON, mentoring is logistically purposeful for tenure-eligible faculty as a focused strategy for promotion success. Through this structured mentoring approach, IUSON has benefited and sustains a strong research ranking, significant scholarship, and abundant leadership. Even with these successes, little to no trickle-down to clinical ranks exists.

Who Will Benefit and What Are The Goals and Desired Outcomes?

IUSON proposes to initiate a *Clinical Faculty Mentoring Initiative*. Faculty eligible for this programming will be doctorally prepared clinical assistant professors within the IUSON core. IUSON is similar to other campus schools in that our Columbus and Bloomington faculty achieve rank and tenure at IUPUI.

The goals for the *Clinical Faculty Mentoring Initiative* are to:

1. Enhance faculty members' ability to achieve promotion from clinical assistant to clinical associate rank
2. Improve scholarly productivity for clinical faculty
3. Reduce limitations and obstacles to advancement in rank (mostly women)
4. Eliminate system barriers to promotion and substitute reward/recognition
5. Integrate the Clinical Faculty Mentoring Initiative into department/school/campus structures and strategic plans to ensure sustainability

This proposal has a high probability of success based on several factors. First, it is closely aligned with the campus and IUSON strategic plan priorities to (1) develop our faculty, (2) promote undergraduate student learning and success since most of these faculty members teach at the baccalaureate level, and (3) leverage our strengths in health and life sciences. Second, this proposal is closely aligned with IUSON initiatives to (1) create a more positive and more supportive school culture and (2) develop our faculty scholarship through implementation of "Scholar Teams" consisting of multiple faculties working together.

How These Goals Are Based on Assessment of Current Status

The number of full-time IUPUI faculty in clinical ranks has recently grown 27%, from 671 in 2009 to 850 in 2013.¹ IUPUI clinical professors are 44% female and 18% minority. The 2014 institutional data² and SON Human Resource current count for the IUSON core note 16 (16.8 %) doctorally prepared assistant clinical faculty; however, IUSON clinical professors are overwhelmingly female (100%), which may suggest special career needs.

Six years ago, IUSON administrative leadership provided master's-prepared clinical faculty with reduced workloads and tuition stipends that allowed them to complete their doctorates. A total of 17 faculty members took advantage of this program at a cost of \$678,190 with 13 having completed and four still finishing doctoral studies. After completion of their doctorate, faculty may receive a two-year reduced workload to support their efforts toward advancing clinical scholarship and knowledge dissemination.

Time toward clinical scholarship, IUSON administrators hoped, would result in greater numbers of assistant clinical faculty applying for promotion. The workload reduction for clinical faculty was considered comparable to that of tenure-eligible faculty, and the time allotted was expected to generate scholarship consistent with campus criteria for advancement in clinical rank. However, clinical promotion remains nil.

Compared to tenure-track faculty, the significant differences for clinical faculty include no paired mentor, little incentive to apply for promotion, and limited understanding of the promotion process. Newly doctorally prepared clinical assistant professors as well as new clinical faculty hires have put forth limited effort toward scholarship. As of October 2014, clinical assistant core faculty who are doctorally prepared (16) represent 16.8% of full-time faculty (95),³ but only 5% of all faculty papers published from July 2012 through September 2014 (12 out of 233 publications). Tschannen et al.⁴ recently reported that clinical assistant professors have on average approximately one publication per year for the six years leading up to promotion.

In a recent survey conducted for this proposal, responses from clinically ranked professors varied when asked,⁵ “While in rank, approximately how many scholarly presentations (e.g., EBP project, poster, oral) have you given at a local, state, regional, national, or international conference?” Interestingly, 27% of respondents had presented fewer than five times, 36% had presented six to nine times, 27% had presented 10-15 times, and 9% had presented 15 or more times ($N=15$; 73.3% return rate). Clinical assistant professors pointed to a need for scholarship collaborators (82%), the lack of mentoring (82%), and an overextended work life (91%) as barriers for achieving promotion. The desire for scholarship mentoring (64%) and promotion process complexity and unclear expectations (73%) were also cited as well. It is evident that clinical faculty members do not have confidence in their ability to be successfully promoted. The IUSON needs assessment survey also uncovered the ideal mentoring desires of clinical assistant professors, which are quoted in the table below. Mentoring focused on these priorities can be built into the departmental and IUSON structure.

Kram's Mentoring Functions⁶

IUSON: Typical examples of responses to question, “What are you looking for in a mentor?”

Career – sponsorship, coaching	My ideal mentor would be an expert in her field, have the time and interest to work closely with me in navigating promotion, provide guidance in scholarship, and be willing to co-author with me.
Psychosocial – role modeling	
Career – sponsorship, coaching	Comparable scholarly interests, good role model, someone who has a desire to be a mentor and is not functioning as a mentor because it is a professional requirement
Psychosocial – role modeling	
Career – sponsorship, coaching, challenging work	Good role model, knowledgeable about research/scholarship

	process, proven researcher that is well published, share like interests
Career –sponsorship, coaching, exposure, challenging work	Someone to guide me regarding grants, connections, dossier; someone to give me insight, support, and collaborate with

Goals Are Measurable

The IUSON mentoring program goals include individual growth goals as well as system/organizational. Because of the nature of these goals, multiple measures and assessments will be utilized to evaluate progress and success over time. The table below illustrates our assessment plan. Elsewhere we describe in more detail the measures for our mentoring activities.

Goals, Assessments, and Frequency

Goals	Assessment, Benchmarks, and Measures	Frequency
1. Enhance faculty members' ability to achieve promotion from clinical assistant to clinical associate rank	Count attendance within IUSON and on-campus P&T workshops as well as engagement in local promotion websites and webinars. Self-evaluation (mentoring measures) Mentoring pair evaluation (mentoring measures)	Dec, April, August for cohorts
2. Improve scholarly productivity for clinical faculty	Count submitted/published papers, abstracts Evaluate connections with scholar teams in-house and external to IUSON (mentoring measures) Attendance at NLN scholarship retreat	At initiation, Dec, April, August for cohorts Dec, April, August for cohorts Post summer attendance
3. Reduce limitations and obstacles to advancement in rank for clinical faculty (mostly women)	Measure faculty satisfaction and perception (mentoring measures) Create workshop for primary and school-level P&T committees, department chairs, and associate deans Evaluate and revise policies for clinical annual review and promotion pay raise	Dec, April, August for cohorts One-time post-workshop evaluation Summer 2015 evaluation
4. Eliminate system barriers to promotion and substitute reward/recognition	Move forward a policy related to improved promotion pay for newly attained rank Create a feedback mechanism for clinical annual reviews regarding progress toward clinical promotion	One-time after new policies are enacted (related to system change)

	Institute IUSON Mentor Pairs Awards	
Integrate the <i>Clinical Faculty Mentoring Initiative</i> with department/school/campus structures and strategic plans to ensure sustainability	<p>2 Chairs, 2 Assistant Chairs at department level; 4-member primary P&T committee; 5-member school P&T trained in evaluation toward clinical promotion based on existing school and campus standards</p> <p>Progress toward clinical promotion is required part of the annual written faculty evaluation</p> <p>Clinical faculty member assigned a mentor and constructs a promotion plan with department</p>	<p>Post-workshop evaluation</p> <p>Audit annually 2015-2018</p> <p>At initiation and each semester 2015-2018.</p>

Identification of Mentors and Protégés

IUSON needs assessment survey indicated that 90% of clinical faculties are interested in a scholarship mentor and 82% do not have a mentor now. The type of mentor or mentoring desired is related to both career and psychosocial mentoring. Thus far, five mentors have been identified. Three additional identified mentors are being queried. Drs. Cullen, McLennon, Shieh, Hendricks, and Carpenter have agreed to each work with a protégé. Their qualifications are described below:

Dr. Cullen – previously has served in administrative roles and was responsible for faculty development, tenure, and promotion. Currently, she coaches junior faculty with publication and career goals. She has a record of mentoring publications and research.

Drs. McLennon and Shieh – both are tenured Associate Professors and Assistant Department Chairs with responsibilities for developing clinical faculty. Both have experiences in clinical research and teaching scholarship and have mentored undergraduate and graduate students and junior faculty.

Dr. Hendricks – is Associate Dean for Undergraduate Programs and is an expert in curriculum and teaching nursing concepts. A particular strength she exhibits is in bringing senior and junior faculty together to collaborate on projects.

Dr. Carpenter – has a 20-year record of mentoring junior faculty, postdoctoral fellows, and students. In her role as Associate Dean for Research, she will also ensure that the appropriate school-level supports are in place to ensure program success.

This Initiative will be announced late spring with a start date of August 1, 2015. The recruitment for clinical assistant professors into the mentoring initiative will be announced throughout the core school via existing communication channels: department Oncourse sites, emails, department meetings, Dean's all-faculty and staff meetings, as well as visible postings. Protégés and mentors will have input into their match and will designate their ranked preferences after an interactive session. Gray's measure for pairs will be used to create a dialogue around preferred mentoring styles during the August orientation session.⁷ This tool engages the pair in discussing the receiving and giving of mentoring communication.

Because this Initiative is deliberate and has purposeful activities, each cohort will consist of eight protégés selected each year in 2015 and 2016. Each of the protégés will receive focused mentoring programming for two years. Cohort one will participate from August 1, 2015, through July 31, 2017; cohort two will participate from August 1, 2016, through July 31, 2018. This Initiative will better prepare 16 protégés for developing their clinical promotion potential.

Proposal Framed Against Current Status

Faculty in IUSON at the last institutional evaluation pointed to salient areas that should be addressed.⁸ Faculty satisfaction results from Information Management and Institutional Research (IMIR) reported values of 50 (0-100 scale, with 100 being the most satisfied) or less in three impactful areas:

- Faculty salary level: 29
- Rewards and recognition for doctorate-practice service: 50
- Faculty morale within my unit: 50

Considering the five goals for this Initiative, it is time to create a climate that prominently displays a successful mentoring model for all current and future clinical professors. Goals proposed for system issues as well as individual career and psychosocial needs are addressed and deemed necessary. First, IUSON will benefit from administrative policy review of our 1999 promotion-to-associate pay raise (maximum) of \$2,500. A second benefit will be review of the annual review process, which currently lacks any requirement to rate progress toward promotion for clinical track. Our mentor proposal has been presented at the Executive Team meeting (Dean, Associate and Assistant Deans, Department Chairs) and received positive support.

A successful mentoring initiative also may be a hiring draw for future faculty. In the last few years the national nursing faculty shortage has become more acute, requiring greater reliance on part-time faculty, visiting lecturers, as well as additional assignments to full-time faculty (in overload). For example, IUSON employed a total of 109 part-time faculty persons in fall 2014 across the core to address faculty shortage issues.⁹ One solution for recruiting more full-time clinical faculty would be to demonstrate an effective promotion model. We have not focused on clinical faculty career/promotion development and must now take action to change this scenario.

Although barriers to promotion have been identified, faculty members are interested in promotion and noted many benefits with the next rank.¹⁰ Ninety percent of respondents from the needs assessment stated they “desire promotion to the next rank” *quite a bit or a tremendous amount*. Identified benefits of promotion included financial (pay, retirement contribution), recognition of accomplishments, personal and job satisfaction, status, and future opportunities. It is hoped that our Initiative will exchange the current status for a more promising future for clinical professors.

The IUSON core system will benefit by increased clinical scholarship in multiple ways. Consider, for example, that clinical scholarship would demonstrate increased productivity, job enhancement, and retention of the clinical professoriate. Clinical scholarship can assist toward an improved reputation and may attract more high quality students. With regard to the SON culture and its core values of *Responsibility, Respect, Trust, and Dialogue*, increased clinical scholarship and promotion potential could

demonstrate that the culture is supportive and responsive to clinical ranks. Thus, the *Mentoring Initiative* is significant to the IUSON core system in several ways.

Methodology/Intervention: “How and When?”

Intervention Design Based on Best Practice

Eby et al.¹¹ have definitively determined protégé perceptions of instrumental (career) support, psychosocial support, and relationship quality via an interdisciplinary meta-analysis. Statistical associations exist between positive protégé perceptions and similarity of attitude, values, beliefs, and personality of their mentor. Additional positive protégé perceptions were associated with interaction frequency and the mentor’s social capital (money and time toward education and position). Eby et al. defined noteworthy mentoring outputs of motivation, performance, career, behavioral, and attitudinal outcomes, as well as health-related outcomes in their process-centered mentoring model.

Lessons from research such as that of Eby et al. are congruent with IUSON expectations and have been considered in the formation of our mentoring program. Initial pairing and ongoing evaluation will monitor perceptions of the protégé and the mentor and will evaluate the mentoring relationship qualities. Program measures and tools will aim to connect and be guided by the Eby et al. model and processes. The complementary logic model guides the processes (attached).

Because this Initiative focuses on academic success for clinical assistant professors promotion, emphasis will be directed toward scholarship development. Clinical track faculty have been shown to be responsive when guided in scholarship.^{4,12} Boyer’s¹³ scholarship model is widely used by nurse educators and it includes four types of scholarship: those of discovery, teaching, application (practice), and integration (see Appendix 1). The National Association of Colleges of Nursing¹⁴ has developed examples to measure outcomes by scholarship type (such as Boyer’s), which will be used as exemplars in our mentoring initiative. One specific activity we plan is protégé attendance at a writing retreat hosted by the National League of Nursing, which is held three times each year.¹⁵

Mentor Pair Activity Timeline for Project

The timeline is a listing of events and activities. The cohorts will be selected annually (2015, 2016), each with eight mentor pairs. Preparation for the 2015-2016 activities will concentrate on scheduling of activities and planning for the dyad. Additionally, the scheduled instrument administration and data collection process will be established for each individual as well as the mentoring pair. Data to be collected include demographics, Mentoring Style Indicator scores, mentoring satisfaction, and learning scores. Clinical faculty members will be asked to save the dates for mentoring activities during the pairing process as well as for other important events. Year 1 will focus on role socialization to teaching, scholarship, and the writing process within the SON. Year 2 will focus on collaboration and connections on campus and externally. Year 2 will also present the idea of increased scholarship self-awareness, dossier preparation, and writing a personal statement. From inception, we will integrate activities into the IUSON departments in order to assimilate sustainability. A total of 16 clinical faculty members will be better prepared and focused, thus able to advance more easily through the promotion process. Currently, IUSON has 16 doctorally prepared clinical assistant professors. This Initiative has the potential to impact at least 80% of the IUSON full-time clinical rank workforce.

Timeline for IUSON Clinical Mentoring Initiative

Pre-pairing actions and plans	May-July 2015	Sept	Oct	Nov	Jan 2016	Feb	March	April
Planning and initiation of program SON system-level interventions	8 mentors & protégés selected and paired for Cohort 1-Year 1	Create Mentor Pair Awards Review and update administrative policies		Design IUSON P&T workshop about CL promotion for chairs, primary and school committees				Offer IUSON P&T workshop about CL promotion
Year 1 Cohort 1: 8 protégés	May-July 2015	Sept	Oct	Nov	Jan 2016	Feb	March	April
Year 1 Orientation promotion workshops Connect to IUSON & campus teaching and research resources Submit to journal NLN Writing Retreat Mentor pair event		Orientation IUPUI online resource CSL	Medicine CTL	SON workshop Event		IUPUI clinical promotion	SON workshop	1-2 journal submissions by April Attend in summer Event
Year 2 Cohort 1 8 protégés	May-July 2016	Sept	Oct	Nov	Jan 2017	Feb	March	April
Year 2 Create collaboration on campus and externally Attend . meeting teaching or clinical Submit to journal Mentor pair event Write personal statement	First attempt evaluated	As identified in protégé plan As scheduled in protégé plan	As identified in protégé plan As scheduled in protégé plan	As identified in protégé plan As scheduled in protégé plan Event		As identified in protégé plan As scheduled in protégé plan	As identified in protégé plan As scheduled in protégé plan	As identified in protégé plan As scheduled in protégé plan 1-2 journal submissions by April Event
							Repeat attempt evaluated	

Year 1 Cohort 2	May-July 2016	Sept	Oct	Nov	Jan 2017	Feb	March	April
Repeat Year 1 plan above								
Year 1 Cohort 2	May-July 2017	Sept	Oct	Nov	Jan 2018	Feb	March	April
Repeat Year 2 plan above								

Recruitment of Participants and Implementation Plan

As shown in the timeline, recruitment of eight clinical assistant professors each year will occur late spring semester. Because the mentors and protégés will carry through a two-year relationship, more mentors will be recruited as we progress and accept the new protégés' cohort in Year 2. We plan to interview protégés, determine progress toward promotion, and provide them with input into their mentor selection. We plan to evaluate dyad-pair activity via the Mentorship Quality Scale and the Mentoring Learning Scale to enhance program satisfaction. Oversight of this Initiative will be provided by Dr. Deborah Cullen with assistance by co-PIs Drs. McLennon and Shieh – both assistant chairs. Implementation plans are also detailed in the timeline, with a strong focus toward administrative policy update and sustainability built into the activity schedule.

Budget: Cost & Sources

In order for protégés to attend the three-day NLN writing retreat, we have budgeted \$1,180 each for airfare and hotel. A \$560 request for refreshments and light meals is also presented for the P&T workshop and mentor-pair events. This \$10,000 budgeted cost will be repeated in Year 2 by matched funding.

Airfare/hotel for on-location NLN writing retreats: \$1,180/protégé x 8 = \$9,440

Refreshments and food costs = \$560

Source of Matching Funds

The source of \$10,000 matching funds will be the IUSON. The matching funds may be cash or foundation account(s) or both as is the Dean's prerogative (see attached letter of support). More modest travel funds are currently provided to each faculty member (up to \$1,000), and this could be increased using cash reserves if this program is successful. This would require the Dean's approval and department implementation. Eventually, the sustainability goal will require departments to carry out the mentoring process.

Assessment Plan: How Will You Know if it Worked?

Assessment success will be closely monitored by benchmarked activities as well as mentoring satisfaction tools. Ultimately, we plan to offer a mechanism toward promotion for the clinical assistant professor. Benchmarks that assess program progress include protégé attendance at P&T workshops, participation in "Scholar Teams," engagement in P&T campus websites, submitted papers and abstracts, and attendance at IUSON Mentor Initiative activities. Barriers to promotion, as stated in the goals, will be positively ameliorated in one to two years. IUSON system change will be assessed via the clinical

promotion workshop attendance for primary, school, department/administrative personnel and committee members, as well as via the updated promotion pay and clinical annual review administrative policies.

Process and Measurement Tools for Assessment of Mentoring Initiative

There are mentoring measures as well as program assessment benchmarks for each of the five goals. Academic faculty mentoring emphasizes processes and scholarship outcomes. Processes of mentoring are well described by Nick et al. in their Best Practices in Academic Mentoring Model.¹⁶ Their model includes processes (development of teaching, research, and service skills) and facilitation of the growth of future leaders in nursing and nursing education. The model also suggests that a mentor-mentee dyad develops a reciprocal relationship during mentoring processes in order to achieve mutually agreed-upon goals. To evaluate quality of mentoring processes, we will use the Mentorship Quality Scale (5 items, Cronbach's alpha reported as .85 in one sample) and the Mentoring Learning Scale (5 items, Cronbach's alpha reported as .88). Both scales were developed by Allen and Eby (Appendix 2).¹⁷

Tools include Gray's Preferred Mentoring Style Inventory⁵ to be introduced in orientation. The Mentorship Quality Scale determines the relationship quality whereas the Mentoring Learning Scale measures protégé/mentor satisfaction.¹⁶ Since both relationship quality and protégé/mentor satisfaction are significant to program success, frequent repeated measures will be carried out for each cohort.

Plan for Sustainability of Initiative: What is the Plan to Continue this Work?

Goal 5 states: Integrate the *Clinical Faculty Mentoring Initiative* into departments and IUSON to guarantee sustainability. Both Co-PIs, Drs. McLennon and Shieh, are Assistant Chairs and will work to integrate the assignment of a mentor to each new clinical associate professor.

The Initiative's activities also promote sustainability. This is illustrated, for example, by the creation of a feedback mechanism for clinical annual reviews as related to progression toward promotion. Better connecting clinical faculty to IUSON Scholar Teams and the IUSON Center for Nursing Research and Scholarship additionally empowers clinical professors with resources for success. As designed and laid out in this Initiative, we have been purposeful in creating system change and a stronger culture that values mentoring.

Summary

In conclusion, as a result of this funding we expect to provide IUSON clinical track faculty with support to take their professional development to the next stage. Most have now completed their doctorates and are poised to begin much-needed clinical programs and initiatives designed to facilitate not only their own promotion, but also to contribute to the mission and goals of IUSON and IU to advance the health care of our community, region, and state. Accordingly, we will be better able to leverage our strengths in health and life sciences.

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Current Conditions, Activities, or Barriers	Inputs (invested resources to achieve goals; key stakeholders)	Outputs		Outcomes – Impact (change or benefits that result)		
		Activities/ Interventions (what program does)	Participation (who we reach)	Short-term goals (formative tools)	Medium Outcomes	Long-term Outcomes (summative tools)
<p><u>Conditions and Barriers</u></p> <p>No Clinical Rank promotions Little CL scholarship CL Assist Prof want mentors</p> <p>Poor SON clarity around CL promotion requirements</p> <ul style="list-style-type: none"> P&T committees CL faculty <p>Woman-centered School</p> <ul style="list-style-type: none"> Oversubscription No role-models Hindrances Career naiveté System barriers <p><u>Goals</u></p> <ul style="list-style-type: none"> Enhance faculty members' ability to achieve clinical promotion to associate rank Improve upon scholarly productivity for clinical faculty Reduce limitations and obstacles to advancement in rank for clinical faculty (mostly women) Eliminate SON system barriers to promotion and substitute reward/recognition Integrate the <i>Clinical Faculty Mentoring Program</i> into Depts. and IUSON to guarantee sustainability 	<p><u>Stakeholders</u></p> <p>16 Faculty Pairs total</p> <p>8-12 SON P&T members</p> <p>2 Chairs 2 Assist Chairs at Dept. level to be trained in CL evaluation, promotion and P&T</p> <p>SON Scholar Teams will collaborate/integrate with CL Faculty</p> <p>Dept/Admin</p> <ul style="list-style-type: none"> Travel Funds Mentor Awards Small Grants (<\$2500) More pay for promotion (>\$2500 to CL Associate) 	<p><u>SON internal activities</u></p> <ul style="list-style-type: none"> Pre select volunteer mentors Call out for protégés (8) Match pairs (8 x 2 yrs) Carry out 2 cohorts Orient pairs – start formative eval of pairs at semester intervals Protégés submit papers, abstracts Create mentor pair award Connect protégés to SON resources such as research and teaching Protégés attend national scholarly writing workshop by NLN Eliminate system barriers <ul style="list-style-type: none"> Clarity of CL promotion criteria Improve promotion pay Annual CL Track Review <p><u>Campus level</u></p> <p>Attend P&T workshops View online Acad Affairs Resources Office of Women, CTL & CSL resources Resources of other schools', centers', institutes' Small grant access Cross-school collaborations</p> <p><u>External</u></p> <p>Attend NLN writing retreat Clinical or teaching convention Connect with like- scholarly persons off campus</p>	<p>Mentors</p> <p>Protégés</p> <p>SON leadership</p> <p>SON P&T committee</p> <p>SON Scholar Teams</p>	<p>Protégés apply - orientation</p> <p>Pairs' ongoing satisfaction</p> <p>Dyad relationship ongoing</p> <p>Attendance and engagement in P&T workshops & web activities</p> <p>Awareness of SON resources and how to connect</p> <p>Initiation- or improved focus of scholarly activities</p> <p>Utilization of the program:</p> <p>Do they participate? Do they obtain skills? Are they using it?</p>	<p>Pairs' ongoing evaluation measures</p> <p>Connect with Campus level resources and persons</p> <p>Journal articles submitted</p> <p>Initiate SON Mentor Award</p> <p>P&T clarity around clinical dossiers</p> <p>Improve promotion pay</p>	<p>Pairs' ongoing evaluation measures</p> <p>Work in scholarly team toward a focused purpose/agenda</p> <p>Writes personal statement</p> <p>Plans for dossier submission</p> <p>SON barriers adjusted via policy change</p>

Assumptions:

Value of mentoring by faculty as a path toward promotion. We have measured clinical assistant professor desire to have a mentor (>90% value this).

External Factors or Barriers:

Barrier: SON climate and understanding for promotion of clinical assistant professors to associate level. This is evidenced by the lack of any assistant to associate clinical promotion in the last decade.

Timeline: Cohort 1: Aug 2015 – July 2017 Cohort 2: Aug 2016 – July 2018 – program is integrated into the department.

Appendix 1. Examples in each type of scholarship from the AACN (1999)

Scholarship	Examples
Discovery	<ul style="list-style-type: none"> • Peer-reviewed publications of research, theory, or philosophical essays • Presentations of research, theory, or philosophical essays • Grant awards in support of research or scholarship • Mentorship of junior colleagues in research or scholarship • State, regional, national, or international recognition as a scholar in an identified area • Positive peer evaluations of the body of work
Teaching	<ul style="list-style-type: none"> • Peer-reviewed publications of research related to teaching methodology or learning outcomes, case studies related to teaching-learning learning theory development, and development or testing educational models or theories • Accreditation or other comprehensive program reports • Successful applications of technology to teaching and learning • Positive peer assessments of innovations in teaching • State, regional, national or international recognition as a master teacher • Published textbooks or other learning aids • Grant awards in support of teaching and learning • Design of outcome studies or evaluation/assessment programs • Presentations related to teaching and learning
Application (practice)	<ul style="list-style-type: none"> • Peer-reviewed publications of research, case studies, technical applications, or other practice issues • Presentations related to practice • Consultation reports • Reports compiling and analyzing patient or health services outcomes • Peer reviews of practice • Grant awards in support of practice • State, regional, national, or international recognition as a master practitioner • Professional certifications, degrees, and other specialty credentials • Reports of meta-analysis related to practice problems • Reports of clinical demonstration projects • Policy papers related to practice
Integration	<ul style="list-style-type: none"> • Peer-reviewed publications of research, policy analysis, case studies, integrative reviews of the literature and others • Copyrights, licenses, patents, products for sale • Published books • Positive peer evaluations of contributions of integrative scholarship • Reports of interdisciplinary programs to integrative scholarship • Reports of interdisciplinary programs or service projects • Interdisciplinary grant awards • Presentations • Policy papers designed to influence organizations or governments

Appendix 2

Mentoring Quality and Learning Scales

Please rate your mentoring experience with your mentor (protégé).

1= Strongly disagree 2= Disagree 3 = No opinion 4 = Agree 5 = Strongly agree	Strongly disagree	Disagree	No opinion	Agree	Strongly agree
MENTORING QUALITY					
The mentoring relationship between my mentor or protégé and I was very effective.	1	2	3	4	5
I am very satisfied with the mentoring relationship my mentor (or protégé) and I developed.	1	2	3	4	5
I was effectively utilized as a mentor (protégé) by my protégé (mentor).	1	2	3	4	5
My mentor (or protégé) and I enjoyed a high-quality relationship.	1	2	3	4	5
Both my mentor (or protégé) and I benefited from the mentoring relationship.	1	2	3	4	5
MENTORING LEARNING					
I learned a lot from my mentor (or protégé).	1	2	3	4	5
My mentor (protégé) gave me a new perspective on many things.	1	2	3	4	5
My mentor (or protégé) and I were “co-learners: in the mentoring relationship.	1	2	3	4	5
There was reciprocal learning that took place between my mentor (or protégé) and me.	1	2	3	4	5
My mentor (or protégé) shared a lot of information with me that helped my own professional development	1	2	3	4	5



IUPUI

SCHOOL OF NURSING

INDIANA UNIVERSITY

Indianapolis

January 27, 2015

Professor Gail F. Williamson, Chair
IUPUI Mentoring Academy Planning Committee
Office of Academic Affairs
Administration Building, Suite 127
355 North Lansing Street
Indianapolis, IN 46202-2896

Dear Professor Williamson,

We enthusiastically support the proposal entitled, "The School of Nursing Clinical Faculty Mentoring Initiative." This initiative is central to the mission of the Indiana University School of Nursing (IUSON), and addresses one of the 10 major strategic initiatives of IUPUI and IUSON to provide faculty development opportunities for scholarship. The IUSON has a great need for this program, particularly to support advancement of our clinical assistant professors to higher ranks; we have not had a clinical assistant professor promoted to the clinical associate professor rank in over a decade.

This proposal provides a structured plan for 16 of our clinical assistant professors that includes matching each with a mentor, professional development activities, and systems level thinking to support these important faculty members.

As the Chairs of the Departments of Community and Health Systems and Science of Nursing Care, we enthusiastically support Drs. Cullen, McLennon, and Shieh in this effort. Professor Cullen has a long history of serving as a mentor and champion for faculty development and advancement. In addition, Drs. McLennon and Shieh are well poised to not only implement this initiative, but to also to sustain this important program over time in their roles as Assistant Chairs.

Overall, we fully endorse this important initiative and will provide our utmost support for the successful implementation and sustainability of this program.

Sincerely,

Diane Von Ah, PhD, RN, FAAN
Department Chair
Community and Health Systems

Tamilyn Bakas, PhD, RN, FAHA, FAAN
Department Chair
Science of Nursing Care



INDIANA UNIVERSITY

SCHOOL OF NURSING

Office of the Dean

January 8, 2015

Prof. Gail F. Williamson, Chair
IUPUI Mentoring Academy Planning Committee
Office of Academic Affairs
Administration Building, Suite 127
355 North Lansing Street
Indianapolis, IN 46202-2896

Dear Gail:

I am pleased to provide this letter in support of the proposal titled *The School of Nursing Clinical Faculty Mentoring Initiative*. Clinical faculty are an invaluable resource to the mission of the IU School of nursing, and I am committed to support efforts to provide them with programming and resources for professional development and advancement in rank. This initiative will also lead to improving administrative policies for development and rank advancement.

As evidence of the School of Nursing's commitment, I will provide \$10,000 of internal funding to the project. Professors McLennon and Shieh currently serve as Assistant Department Chairs, and part of their role is to facilitate advancement of clinical faculty, and Professor Cullen has been active as a mentor and champion of clinical track faculty. I fully support the work that Professors Cullen, McLennon and Shieh will perform as co-PIs and faculty mentors.

Human potential needs to be nurtured via coaching, feedback, personal development, and psychosocial support. Those elements are incorporated within this mentoring initiative, along with ongoing evaluation of the mentoring pair, and reflect current best practices. Finally, sustainability built into this approach will allow for ongoing better integration of mentoring clinical faculty within the Departments.

Sincerely,

Michael T. Weaver, RN, PhD, FAAN
Professor and Interim Dean
Indiana University School of Nursing